| 11-02.05   |  |   |                              |                      |                                      |                          |      |           |                        |     |                |                        |   |
|--|--|---|------------------------------|----------------------|--------------------------------------|--------------------------|------|-----------|------------------------|-----|----------------|------------------------|---|
| <del></del>  | PATENT A                                       | RD  | Application or Docket Number |                      |                                      |                          |      |           |                        |     |                |                        |   |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |   |                              |                      |                                      |                          |      | MALL E    | NTITY                  | OR  | OTHER<br>SMALL |                        | 0 |
| TOTAL CLAIMS   |  |   | 37                           |                      |                                      |                          | [    | RATE      | FEE                    |     | RATE           | FEE                    | 6 |
| FOR  |  |   | NUMBER FILED                 |                      | NUMBER EXTRA                         |                          |      | Basic Fee | 355.00                 | OR  | BASIC FEE      | 710.00                 | 2 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 5/ minus 20=                 |                      | . 17                                 |                          |      | X\$ 9=    |                        | OR  | X\$18=         | 306                    | 7 |
| INDEPENDENT CLAIMS   |  |   | 3 minus 3 =                  |                      | 7                                    |                          | Ì    | X40=      |                        | OR  | X80=           |                        | 8 |
| MULTIPLE DEPENDENT CLAIM P   |  |   | RESENT                       |                      |                                      |                          |      | +135=     |                        | OR  | +270=          |                        |   |
| * if the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                              |                      |                                      | olumn 2                  | į    | TOTAL     |                        | OR  | TOTAL          | 10/6                   | 1 |
| 4/20/0 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)      |  |   |                              |                      |                                      |                          |      |           | ENTITY                 | OR  | OTHER<br>SMALL | THAN                   |   |
| NT A K   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                              | HIGH<br>NUN<br>PREVI | (EST<br>(EST<br>(BER<br>OUSLY<br>FOR | (Column 3) PRESENT EXTRA |      | RATE      | ADDI-<br>TIONAL<br>FEE |     | RATE           | ADDI-<br>TIONAL<br>FEE |   |
| AMENDMENT  | Total  | . 37  | Minus                        | ۍ ۰۰                 | 7                                    | }                        |      | X\$ 9=    |                        | OR  | X\$18=         |                        |   |
|  | Independent                                    | · 3   | Minus                        | •••                  | 3                                    | = 0                      |      | X40=      |                        | OR  | X80=           | X.                     | 1 |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                              |                      |                                      |                          |      | +135=     |                        |     | +270=          | (                      | 1 |
| 11.02.966 jumn 1 (Column 2) (Column 3)                                   |  |   |                              |                      |                                      |                          |      |           |                        |     |                |                        |   |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                              | HIG<br>NUM<br>PREV   | HEST<br>MBER<br>HOUSLY<br>FOR        | PRESENT<br>EXTRA         |      | RATE      | ADDI-<br>TIONAL<br>FEE |     | RATE           | ADDI-<br>TIONAL<br>FEE |   |
|  | Total  | . 31  | Minus                        | <b>'</b> ')          | 7                                    | - 0                      |      | X\$ 9=    | /                      | OR  | X\$18=         | /                      |   |
| AME  | Independent                                    | · 3   | Minus                        | ٠٠٠٠                 | 3                                    | - 1                      | 11   | X40∞      | 17                     | OR  | X80=           | 17                     | 1 |
| -  | FIRST PRESE                                    | ENTATION OF MULTIPLE DEPENDENT CLAIM        |                              |                      |                                      |                          |      | +135=     | 1                      | OR  | +270=          |                        | 1 |
| TOTAL  |  |   |                              |                      |                                      |                          |      |           |                        |     | TOTAL          |                        | 1 |
| ADDIT, FEE ADDIT, FEE ADDIT, FEE Column 1) (Column 2) (Column 3)         |  |   |                              |                      |                                      |                          |      |           |                        |     |                |                        | 1 |
| MENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                              | NUI<br>PREV          | HEST<br>WBER<br>HOUSLY<br>D FOR      | PRESENT<br>EXTRA         |      | RATE      | ADDI-<br>TIONAL<br>FEE |     | RATE           | ADDI-<br>TIONAL<br>FEE |   |
| Ş  | Total  | •   | Minus                        | ••                   |                                      |                          | IJ I | X\$ 9=    |                        | OR  | X\$18=         |                        |   |
| NE NE  | Independent                                    | •   | Minus                        | 100                  |                                      | •                        | 11   | X40=      |                        | OB. | X80=           |                        | 1 |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.

"If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

"If the "tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "tighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "tighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. OR ADDIT. FEE

OR

OR

+270=

TOTAL

+135=